

10-17-05

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail or Fax Mail Stop ISSUE FEE US Express Mail Receipt No. Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 EV792964696 October 13, 2005  
(571) 273-2885

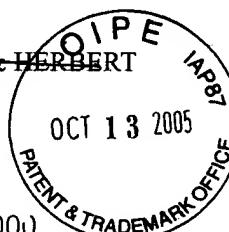
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590 07/13/2005

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Victoria Linne Poulsen	(Depositor's name)
<i>Richard F. Trecartin</i>	(Signature)
October 13, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/222,460	12/29/1998	MARC R. HAMMERMAN	A-64236-3-RF	3124

TITLE OF INVENTION: COMPOSITION AND METHOD FOR IMPROVING FUNCTION OF EMBRYONIC KIDNEY TRANSPLANTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	10/13/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS		10/19/2005 RFEKADU2 00000007 09222460	700.00 OP
GUPTA, ANISH	1654	424-093700	01 FC:2501 02 FC:1504 03 FC:8001	300.00 OP	300.00 OP
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Richard F. Trecartin	2. _____ 3. _____	30.00 OP	

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

Washington University

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Campus Box 8013, 660 South Euclid Avenue  
St. Louis, MO 63110

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are enclosed:

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies 10

## 4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed.
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## 5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Richard F. Trecartin

Date October 13, 2005

Typed or printed name Richard F. Trecartin

Registration No. 31,801

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